Fill in th	nis inforn	nation to identify your case:					
Debtor 1	1	Shelia L Graves					
	_	Full Name (First, Middle, Last)					
Debtor 2							
(Spouse,	if filing)	Full Name (First, Middle, Last)					
United S	States Ba	nkruptcy Court for the	SOUTHERN DISTRICT OF MISSISSIPPI		is is an amended plan, and he sections of the plan that		
Case nu	mbor			have been o	-		
(If known)				nave been c	mangea.		
(II KIIOWII)	,						
]			
Chapt	er 13 I	Plan and Motions for	Valuation and Lien Avoidance		12/17		
Dout 1.	Notice	-					
Part 1:	Notice	<u> </u>					
To Debto	ors:	indicate that the option is	that may be appropriate in some cases, but the prappropriate in your circumstances or that it is perules and judicial rulings may not be confirmable. or in this plan.	missible in your jud	icial district. Plans that		
		In the following notice to c	reditors, you must check each box that applies				
To Cred	itors:	Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.					
		You should read this plan can attorney, you may wish	arefully and discuss it with your attorney if you have to consult one.	one in this bankruptc	y case. If you do not have		
		to confirmation on or befo	reatment of your claim or any provision of this pla ore the objection deadline announced in Part 9 of t Bankruptcy Court may confirm this plan without tule 3015.	he Notice of Chapter	r 13 Bankruptcy Case		
			ims. Creditors must file a proof of claim to be paid un	nder any plan that ma	y be confirmed.		
		plan includes each of the	be of particular importance. Debtors must check on following items. If an item is checked as "Not Incluve if set out later in the plan.				
1.1		on the amount of a secured al payment or no payment a	claim, set out in Section 3.2, which may result in t all to the secured creditor	✓ Included	☐ Not Included		
1.2	Avoida	<u> </u>	possessory, nonpurchase-money security interest,	☐ Included	▼ Not Included		
1.3	Nonstar	ndard provisions, set out in l	Part 8.	☐ Included	✓ Not Included		
Part 2:	Plan P	ayments and Length of Plan	l		•		
2.1	Length	of Plan.					
	Ü						
The plan	period sl	nall be for a period of 60	months, not to be less than 36 months or less than 60	months for above m	edian income debtor(s). If		
fewer tha	an 60 moi	nths of payments are specified	l, additional monthly payments will be made to the ex	tent necessary to make	te the payments to creditors		
specified	in this p	lan.					
2.2	Debtor	(s) will make payments to th	e trustee as follows:				
			, semi-monthly, weekly, or bi-weekly) to the		Unless otherwise ordered by		
		r directing payment shall be i	ssued to the debtor's employer at the following addre		·		
	-	Debtor proposes to pay direct income from her emplo	ect as the plan payments exceed her monthly yer.				
	-						
	-						

APPENDIX D Chapter 13 Plan Page 1

Debtor	Shelia L Grave	es		Case r	number	
2.3	Income tax returns/ref	funds.				
	Check all that apply					
	✓ Debtor(s) will	retain any exempt inc	ome tax refunds rec	eived during the plan	n term.	
					during the plan term within 14 days of filing ceived during the plan term.	g the
	Debtor(s) will	treat income refunds a	as follows:			
	tional payments.					
Check		e" is checked, the rest	of § 2.4 need not b	e completed or repro	oduced.	
Part 3:	Treatment of Secured	Claims				
3.1	Mortgages. (Except mo	ortgages to be cramn	ned down under 11	U.S.C. § 1322(c)(2)	and identified in § 3.2 herein.).	
	Check all that apply.					
	None. If "None" is co	hecked, the rest of \S 3.	1 need not be comp	leted or reproduced.		
3.1(a) ✓	1322(b)(5) shall be sc	heduled below. Absen	t an objection by a	party in interest, the	ned and cured under the plan pursuant to 11 plan will be amended consistent with the protthly mortgage payment proposed herein.	
	•			commung	any moregage payment proposed neterm	
	Atg pmts to <u>Shellpoir</u> ng June 2019		ng 3797.35 📝 Plan	Direct I	ncludes escrow V Yes No	
Ü	<u> </u>		 <u>+</u> _		<u> </u>	
N	Atg arrears to Shellp	ooint Mortgage Ser	vicing Thre	ough May 2019	\$4,400.00@\$73.33	3 month
3.1(b)	U.S.C. § 1322(b)(5	5) shall be scheduled b	elow. Absent an ob	jection by a party in	e maintained and cured under the plan pursu interest, the plan will be amended consisten continuing monthly mortgage payment prop	nt with
	y address: 142	Macedonia Road M	Mount Olive MS 3	9119		
	ts to <u>Federal National</u> ng June 2019	Mortgage Servicing @	\$554.59	Plan	Includes escrow Yes	
9			<u> </u>			
Propert	y Mtg arrears to	Federal National	Mortgage throug	h May 2019	\$20,000.00@\$333.33 pe	er month
3.1(c)		to be paid in full ove e proof of claim filed b			y a party in interest, the plan will be amende	d
Creditor	: -NONE-	Approx. amt	. due:	Int. Rate	*.	
	Address:			Kate	·	
	Balance to be paid with				<u></u>	
	d in Part 2 of the Mortgagor claim to be paid without		ichment)			
	o Total Debt less Principa					
Special o	claim for taxes/insurance	: \$	-NONE- /mc	onth, beginning n	nonth .	
	d in Part 4 of the Mortga			, c <u>c _</u>		

^{*} Unless otherwise ordered by the court, the interest rate shall be the curent Till rate in this District

Debtor	5	nella L Graves		Case number		
Insert ac	lditional ci	laims as needed.		_		
3.2	Motion f	for valuation of security, p	payment of fully secured	claims, and modification of u	ndersecured claims. Check	one.
				ot be completed or reproduced. nly if the applicable box in Par	t 1 of this plan is checked.	
	₽	amounts to be distributed to at the lesser of any value s	to holders of secured claim to the test of	1 U.S.C. § 506(a) and § 1325(a as, debtor(s) hereby move(s) the e set forth in the proof of claim. of the Notice of Chapter 13 Bar	court to value the collateral Any objection to valuation s	described below shall be filed on
		of this plan. If the amount treated in its entirety as an	of a creditor's secured cla unsecured claim under Pa	mount of the secured claim will im is listed below as having no art 5 of this plan. Unless otherwittrols over any contrary amounts	value, the creditor's allowed se ordered by the court, the a	claim will be
Name (of creditor	Estimated amount of creditor's total claim #	Collateral	Value of collateral	Amount of secured claim	Interest rate*
Capital Auto F		\$11,339.10	2012 Toyota Avalon	\$9,500.00	\$9,500.00	6.75%
Insert ac	lditional ci	laims as needed.				
#For mo	bile homes	s and real estate identified i	n § 3.2: Special Claim for	taxes/insurance:		
-NONE	Name of	creditor	Collateral	Amount per month	Begini month	ning
		ordered by the court, the in ified in § 3.2: The current r		rrent Till rate in this District		
3.3	Secured	claims excluded from 11	U.S.C. § 506.			
Chec	ck one. ✓	None. If "None" is checke	ed, the rest of § 3.3 need no	ot be completed or reproduced.		
3.4	Motion t	to avoid lien pursuant to 1	1 U.S.C. § 522.			
Check of	ne.	None. If "None" is checke	ed, the rest of § 3.4 need no	ot be completed or reproduced.		
3.5	Surrend	er of collateral.				
	Check on ✓	None. <i>If "None" is checked</i> The debtor(s) elect to surrouthat upon confirmation of	ender to each creditor liste this plan the stay under 11	ot be completed or reproduced. d below the collateral that secur U.S.C. § 362(a) be terminated a wed unsecured claim resulting for	as to the collateral only and t	hat the stay
Fyeter	Finance	Name of Creditor		2010 Dodge Challenger	Collateral	
				2007 Dodge Pick Up Truck	<u> </u>	
	Capital One Auto Finance Kia Motor Finance			2015 Kia Optima		
						

 ${\it Insert\ additional\ claims\ as\ needed}.$

Debtor	Shelia L Graves	Case number				
Part 4:	Treatment of Fees and Priority C	Noime				
	-	Adulis				
l.1	General Trustee's fees and all allowed priori without postpetition interest.	ty claims, including domestic support obligations other than those treated in § 4.5, will be paid in full				
1.2	Trustee's fees Trustee's fees are governed by statute and may change during the course of the case.					
1.3	Attorney's fees.					
	✓ No look fee:					
	Total attorney fee charged:	\$3,600.00				
	Attorney fee previously paid:	\$690.00				
	Attorney fee to be paid in plan confirmation order:	92,910.00				
	Hourly fee: \$ (Subject to	approval of Fee Application.)				
1.4	Priority claims other than attorne	Priority claims other than attorney's fees and those treated in § 4.5.				
	Check one. ✓ None. If "None" is checke ☐ Internal Revenue Service ☐ Mississippi Dept. of Revenue	rd, the rest of § 4.4 need not be completed or reproduced. So.00 \$0.00				
	Other	\$0.00				
1.5	Domestic support obligations.					
	None. If "None" is checked	ed, the rest of § 4.5 need not be completed or reproduced.				
Part 5:	Treatment of Nonpriority Unsecu	ured Claims				
5.1	Nonpriority unsecured claims not					
	Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the oproviding the largest payment will be effective. <i>Check all that apply</i> . The sum of \$					
✓		these claims, an estimated payment of \$_\overline{\to}0.00__\ ements have been made to all other creditors provided for in this plan.				
		liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$0.00. I above, payments on allowed nonpriority unsecured claims will be made in at least this amount.				
5.2	Other separately classified nonpri	ority unsecured claims (special claimants). Check one.				
	None. If "None" is checked	d, the rest of § 5.3 need not be completed or reproduced.				
Part 6:	Executory Contracts and Unexpi	red Leases				
5.1	The executory contracts and unav	pired leases listed below are assumed and will be treated as specified. All other executory				
,.I	contracts and unexpired leases are					

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Debtor	Shelia L Graves	Case number
	None. If "None" is checked, the rest of	f § 6.1 need not be completed or reproduced.
Part 7:	Vesting of Property of the Estate	
7.1	Property of the estate will vest in the debtor(s	s) upon entry of discharge.
Part 8:	Nonstandard Plan Provisions	
3.1 Part 9:	<u> </u>	visions f Part 8 need not be completed or reproduced.
complet X <u>/</u> s S	Signatures of Debtor(s) and Debtor(s)' Attornation btor(s) and attorney for the Debtor(s), if any, must the address and telephone number. So Shelia L Graves Signature of Debtor 1	ney sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their X Signature of Debtor 2
E	xecuted on April 17, 2019	Executed on
A	1 Jenny Lane ddress rentiss MS 39474-0000	Address
C	City, State, and Zip Code	City, State, and Zip Code
	elephone Number	Telephone Number
W Si 40 Ji	S/ William W. Stover, Jr. Villiam W. Stover, Jr. ignature of Attorney for Debtor(s) 03 South State Street ackson, MS 39201 ddress, City, State, and Zip Code	DateApril 17, 2019
T w	01-949-5000 elephone Number ves@wesstover.com mail Address	MS Bar Number